

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		12/13	9/13
FORMALITY REVIEW	TH	83	10-04-01
RESPONSE FORMALITY REVIEW	CC	JCU114	12-04-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓ 11/03
2	✓ 11/03
3	✓ 11/03
4	✓ 11/03
5	✓ 11/03
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50	✓ 11/03

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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10/1/01  
12-4-01  
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